MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

SERIAL NO. 10 | 544 573

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1"AMENDMENT		AFTER 2 ¹⁰ AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
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7				4			57						
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PTO - 1360	(REV. 11/0	1)								MENT of CO			